

## PART B—ISSUE FEE TRANSMITT

## MAILING INSTRUCTIONS

This form should be used for transmitting the ISSUE FEE. Blocks 2 through 6 should be completed where appropriate. All further correspondence including the Issue Fee Receipt, the Patent, advance orders and notification of maintenance fees will be mailed to addresses entered in Block 1 unless you direct otherwise, by: (a) specifying a new correspondence address in Block 3 below, or (b) providing the PTO with a separate "FEE ADDRESS" for maintenance fee notifications with the payment of issue fee or thereafter. See reverse for Certificate of Mailing, below.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**Burden Hour Statement:** This form is estimated to take 0.2 hours to complete. Time will vary depending on the needs of the individual case. Any comments on the amount of time required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231.

DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Box Issue Fee, Assistant Commissioner for Patents, Washington D.C. 20231

## 1. CORRESPONDENCE ADDRESS

DANIEL W. LATHAM  
MEDTRONIC, INC.  
7000 CENTRAL AVENUE, N.E.  
MINNEAPOLIS MN 55432

F3M1/0401

RECEIVED  
Publishing Division

JUN 30 1997

## 2. INVENTOR(S) ADDRESS CHANGE (Complete only if there is a change)

INVENTOR'S NAME

Street Address

City, State and Zip Code

CO-INVENTOR'S NAME

Street Address

City, State and Zip Code

☐ Check if additional changes are enclosed

APPLICATION NO.

FILING DATE

TOTAL CLAIMS

EXAMINER AND GROUP ART UNIT

DATE MAILED

08/398,629

03/03/95

021

HILTEN, J

DOCKET 3307

04/01/97

First Named Applicant

MIDDLEMAN,

LEE M.

Date

Action

Atty. *Down*

TITLE OF INVENTION

DEVICE OR APPARATUS FOR MANIPULATING MATTER

*CLT 1997 Issue Fee*  
*DEC 11 1997 Drawings*

ATTY'S DOCKET NO.

CLASS-SUBCLASS

BATCH NO.

APPLN. TYPE

SMALL ENTITY

FEE DUE

DATE DUE

3

P7025.06CIPS

606-127.000

L41

UTILITY

NO

\$1290.00

07/01/97

3. Correspondence address change (Complete only if there is a change)

4. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

1 \_\_\_\_\_  
2 \_\_\_\_\_  
3 \_\_\_\_\_

5. ASSIGNMENT DATA TO BE PRINTED ON THE PATENT (print or type)

(1) NAME OF ASSIGNEE

Medtronic, Inc.

(2) ADDRESS: (CITY &amp; STATE OR COUNTRY)

Minneapolis, Minnesota

A ☐ This application is NOT assigned.☐ Assignment previously submitted to the Patent and Trademark Office.☐ Assignment is being submitted under separate cover. Assignment should be directed to Box ASSIGNMENTS.

**PLEASE NOTE:** Unless an assignee is identified in Block 5, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

6a. The following fees are enclosed: Check # 7841 for \$1,320  
☒ Issue Fee ☒ Advance Order - # of Copies 10

6b. The following fees should be charged to:  
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(ENCLOSE A COPY OF THIS FORM)

☐ Issue Fee ☐ Advance Order - # of Copies☒ Any Deficiencies in Enclosed Fees

The COMMISSIONER OF PATENTS AND TRADEMARKS is requested to apply the Issue Fee to the application identified above.

(Authorized Signature) *Clayton H. Down* 35,032

(Date) 6-24-97

NOTE: The Issue Fee will not be accepted from any applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

## Certificate of Mailing

Note: If this certificate of mailing is used, it can be used to transmit the Issue Fee. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing.

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage in an envelope addressed to:

Box ISSUE FEE  
Assistant Commissioner for Patents  
Washington, D.C. 20231

on: 6-24-97 (Date)

Jonathan F. Valdez

(Name of person making deposit)

(Signature)

(Date)

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APR 03 1997

LAW DEPARTMENT  
MEDTRONIC, INC.